# Elorida Department of State Dysio of Coppositions Cleetonic filing Core Sheet

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	Division of Cor Fax Number	porations : (850)617-6383	inc.	ورعيت
From:		, (000) 017 0000	( ) ·	inc co
	Account Name Account Number	: C T CORPORATION SYSTEM : FCA000000023	14.7 24.2 20.4 20.4 20.4	8 6
	Phone Fax Number	: (850) 205-8842 : (850) 878-5368	)	0

## Foreign Limited Liability Company GUARDED EXCHANGE, L.L.C.

Certificate of Status	0
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J. HARRIS

2/9/2016 4:41:39 PM From: To: 8506176383( 2/4 )

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),FtV	ision of Corporations			
B.Bech:	Guarde	ed tixchange, LL	0	
20174	Name of L	imited Liability C	ompany	
e enclosed istence, ar	"Application by Foreign Limited Liability Compa d check are submitted to register the above referen	any for Authoriza need foreign limit	tion to Tra ed liability	ansact Business in Florida," Certific y company to transact business in F
ase return	all correspondence concerning this matter to the f	hllowing:		
	. D	ebbie Conde		
	Na	me of Person		
	Securus	s Technologies, I	nc.	
	Fir	m/Company		
	14651 Dalla	as Parkway, Suite	600	
	4-9-1	Address		
	Du	Bas, TX 75254		
	City/Sta	ate and Zip Code		
	regulatory	reports@securus	ech.net	
	E-mail address: (to be used	for future annual	report not	tification)
r further i	nformation concerning this matter, please call:			
	Debbic Condo	972 _ at (	)	277-0395
	Name of Contact Person	Area Code	Day	ytime Telephone Number
Dis Reg P.C	ILING ADDRESS: ision of Corporations distration Section . Box 6327 ahassee, FL 32314		Division Registrat Clifton B 2661 Exc	F ADDRESS:  of Corporations  ion Section  Building  coutive Center Circle  see, FL 32301
	t check for the following amount: 125.00 Filing Fee	☐ \$155.00 Filir Certified Copy	ıg Fee &	S160.00 Filing Fee, Certificat of Status & Certified Copy

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	Quarded Exchange, LLC	
(Name of Fore	igo Limited Liability Company; must include "Limited Liability Company," "L.L.C.," o	or "LUC!")
If name unavailable, enter al liability Company," "L.L.C."	ternate name adopted for the purpose of transacting business in Florida. The afternate no 'or 'LLC.')	arne must include "Limited
Missouri	, N/	
(Jurisdiction under the law	of which foreign limited liability  3. N/a  (FEI number, if applicable)	c)
company is organized)		
	N/A (Date first transacted business in Plorida, if prior to registration.)	
	(See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
	120 South Central Ave	
	Clayton, MO 63105	
	(Street Address of Principal Office)	
	14651 Dailus Parkway, Suite 600	SE I Prove
	Paller TW 76264	
	Dallas, TX 75254 (Mailing Address)	
	<b>,</b> , , , , , , , , , , , , , , , , , ,	္ကြယ္လို လူ
Name and street addres	s of Florida registered agent: (P.O. Box NOT acceptable)	5
Name:	National Registered Agents, Inc.	**
Office Address:	1200 South Pine Island Road	
	Plantation , Florida 33324	•
egistered agent's accept	(City) (Zip code)	<del></del>
signated in this applicate complywith the provision complywith the provision of n	gistered agent and to accept service of process for the above stated limited lia- tion, I hereby accept the appointment as registered agent and agree to act in t ons of all statutes relative to the proper and complete performance of my duti- my position as registered agent.  National Registered Agents, Inc.	his capacity. I further agree
1		
	(Registered agent's significate)	Assistant Secretary
. The name, title or capa	city and address of the person(s) who has/have authority to manage is/are:	
emis J. Reinhold- Vice	President & General Council 14651 Dallas Parkway, Suite 600 Dallas, TX 75	254
obert Pickens- President	14651 Dallas Parkway, Suite 600 Dallas, TX 75254	Paradraphia Bread 14 d Balar
coffrey Boyd- Chief Fin.	ancial Officer 14651 Dallas Parkway, Suite 600 Dallas, TX 75254	
-		
Attached is a certificate risdiction under the law of the translator must be su	of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation bmitted)  Signature of an authorized person	g custody of records in the of the certificate under oath
	Signature of an authorized person	
	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that a the Department of State constitutes a third degree felony as provided for in s.81	
	Dennis J. Reinhold	
	Typed or printed name of signee	<del></del>



### Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

#### GUARDED EXCHANGE, L.L.C. LC0063682

was created under the laws of this State on the 12th day of April, 2002, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 5th day of February, 2016.

Secretative State

Certification Number: CERT-02052016-0079

